

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 29, 1999.

Application or Docket Number

CA 1643920

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| FOR | NUMBER FILED | NUMBER EXTRA |
|----------------------------------|--------------|---------------|
| BASIC FEE | | |
| TOTAL CLAIMS | 110 | minus 20 = 90 |
| INDEPENDENT CLAIMS | 10 | minus 3 = 7 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

| RATE | FEES | RATE | FEES |
|--------|--------|----------|--------|
| | 345.00 | OR | 690.00 |
| X\$ 9- | | OR | X\$18- |
| X30- | | OR | X78- |
| +130- | | OR | +260- |
| TOTAL | | OR TOTAL | 1856 |

11/17/09 CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | 110 | Minus | ** | = |
| Independent | 10 | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

OTHER THAN
OR SMALL ENTITY

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|-----------------------|------------------------|
| X\$ 9- | | X\$18- | |
| X30- | | X78- | |
| +130- | | +260- | |
| TOTAL ADDT. FEE | | OR TOTAL ADDT. FEE | |

8/8/05

(Column 1) (Column 2) (Column 3)

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | 110 | Minus | ** | = |
| Independent | 10 | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|-----------------------|------------------------|
| X\$ 9- | | X\$18- | |
| X30- | | X78- | |
| +130- | | +260- | |
| TOTAL ADDT. FEE | | OR TOTAL ADDT. FEE | |

9/26/05

(Column 1) (Column 2) (Column 3)

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | 110 | Minus | ** | = |
| Independent | 10 | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|-----------------------|------------------------|
| X\$ 9- | | X\$18- | |
| X30- | | X78- | |
| +130- | | +260- | |
| TOTAL ADDT. FEE | | OR TOTAL ADDT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 2.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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